ALABAMA BOARD FOR REGISTERED INTERIOR DESIGNERS

Mailing: 211 Lockridge Lane ■ Riverside, AL 35135 ■ 205-317-0356

Physical: 208 20th St N ■ Birmingham, AL 35203

E-Mail: ID.ADMIN@ABRID.ALABAMA.GOV



CHANGE OF NAME OR ADDRESS

INSTRUCTIONS:

• This application shall be completed in its entirety, including signature and date.

Please check all that apply:					
	☐ Name Change ☐ Residence Information C		hange	☐ Business Information Change	
SECTION I: NAME CHANGE					
Previous First Name: Previous Middle/Maid		en Name:	Previous Last Name:		
Current First Name: Current Middle/Maiden Nam				Current Last Name:	
SECTION II: ADDRESS AND INFORMATION CHANGE					
RESIDENCE	Mailing Address:		Preferred	Mailing Address: □ Res	sidence Business
	City State Zip:				
	Phone Number:		E-Mail Addre	SS:	
BUSINESS	Business Name:		Position or T	itle:	
	Mailing Address:				
	City:		State:		Zip Code:
	Phone Number:		Fax Number:	:	
SECTION IV: Please read completely and sign below.					
I hereby certify that the information provided is accurate and complete:					
Signature:			Date [.]		

FRM: INFCHA Rev: 04/18 Page 1 of 1